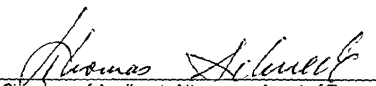



15661 U.S. PRO
06/25/03

PTO/SB/56 (02-01)
Approved for use through 01/31/2004. OMB 0651-0038
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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| REISSUE APPLICATION FEE TRANSMITTAL FORM | | | | | | Docket Number (Optional) ATM-247 | | |
|--|---|-------------------------------------|---|---|--------------|-------------------------------------|---------------------------|-----|
| Claims as Filed - Part 1 | | | | | | | | |
| Claims in Patent | | Number Filed in Reissue Application | (3) Number Extra | Small Entity | | Other than a Small Entity | | |
| | | | | Rate | Fee | Rate | Fee | |
| (A) 17 | Total Claims (37 CFR 1.16(j)) | (B) 17 | **** 0 = | x \$ | | x \$ | | |
| (C) 4 | Independent claims (37 CFR 1.16(i)) | (D) 4 | . 1 = | x \$ | | x \$ 42 = | \$ 42 | |
| Basic Fee (37 CFR 1.16(h)) \$ | | | | | | | \$ 750 | |
| Total Filing Fee \$ | | | | | | OR | \$ 792 | |
| Claims as Amended - Part 2 | | | | | | | | |
| | (1) Claims Remaining After Amendment | | (2) Highest Number Previously Paid For | (3) Extra Claims Present | Small Entity | | Other than a Small Entity | |
| | | | | | Rate | Fee | Rate | Fee |
| Total Claims (37 CFR 1.16(j)) | *** | MINUS | ** | * | x \$ | | x \$ | |
| Independent Claims (37 CFR 1.16(i)) | *** | MINUS | ***** | = | x \$ | | x \$ | |
| Total Additional Fee \$ | | | | | | OR | \$ | |
| <p>* If the entry in (D) is less than the entry in (C), Write "0" in column 3.</p> <p>** If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space.</p> <p>*** After any cancellation of claims.</p> <p>**** If "A" is greater than 20, use (B - A); if "A" is 20 or less, use (B - 20).</p> <p>***** "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C).</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____.</p> <p>A duplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account No. <u>19-0590</u>.</p> <p>A duplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> A check in the amount of \$ <u>792.00</u> to cover the filing / additional fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> | | | | | | | | |
| June 25, 2003 Date | | | |  Signature of Applicant, Attorney or Agent of Record | | | | |
| | | | | Thomas Schneck Typed or printed name | | | | |

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PTO/SB/50 (02-01)
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REISSUE PATENT APPLICATION TRANSMITTAL

| | | |
|---|--|----------------|
| Address to: Assistant Commissioner for Patents Box Reissue Mail Stop Reissue Washington, DC 20231 Alexandria, VA 22313-1450 | Attorney Docket No. | ATM-247 |
| | First Named Inventor | Amit S. Kelkar |
| | Original Patent Number | 6,489,254 |
| | Original Patent Issue Date (Month/Day/Year) | 12/03/2002 |
| | Express Mail Label No. | EV342173155US |

APPLICATION FOR REISSUE OF:

(Check applicable box)



Utility Patent



Design Patent



Plant Patent

APPLICATION ELEMENTS (37 CFR 1.173)

1. ☒ Fee Transmittal Form (PTO/ SB/ 56)
(Submit an original, and a duplicate for fee processing)
2. ☐ Applicant claims small entity status. See 37 CFR 1.27.
3. ☒ Specification and Claims in double column copy of patent
format (amended, if appropriate)
4. ☒ Drawing(s) (proposed amendments, if appropriate)
5. ☒ Reissue Oath/Declaration (original or copy)
(37 C.F.R. § 1.175) (PTO/SB/51 or 52)
6. ☐ Power of Attorney
7. Original U.S. Patent currently assigned? ☒ Yes ☐ No
(If Yes, check applicable box(es))
 - ☐ Written Consent of all Assignees (PTO/SB/53)
 - ☒ 37 C.F.R. § 3.73(b) Statement
(PTO/SB/96)
8. ☐ CD-ROM or CD-R in duplicate, Computer Program (Appendix)
or large table
9. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all of the following are necessary)
 - a. ☐ Computer Readable Form (CFR)
 - b. Specification Sequence Listing on:
 - i ☐ CD-ROM (2 copies) or CD-R (2 copies); or
 - ii ☐ paper
 - c. ☐ Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

10. ☐ Statement of status and support for all changes
to the claims. See 37 CFR 1.173 (c).
11. ☒ Original U.S. Patent for surrender
 - ☒ Ribboned Original Patent Grant
 - ☐ Statement of Loss (PTO/SB/55)
12. ☐ Foreign Priority Claim (35 U.S.C. 119)
(if applicable)
13. ☒ Information Disclosure Statement (IDS)/PTO-1449 ☒ Copies of IDS
Citations
14. ☐ English Translation of Reissue Oath/Declaration
(if applicable)
15. ☒ Preliminary Amendment
16. ☒ Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
17. Other: Certificate of Mailing
.....
.....

18. CORRESPONDENCE ADDRESS



Customer Number or Bar Code Label

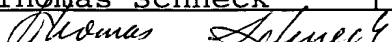
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|----------------|-------------------|------------------|----------------|------------|----------------|
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| Address | P.O. Box 2-E | | | | |
| | | Zip Code | 95109-0005 | | |
| City | San Jose | State | CA | Fax | (408) 297-9748 |
| Country | U.S.A. | Telephone | (408) 297-9733 | | |

| | | | |
|-----------------------------|---|--|------------|
| NAME (Print/Type) | Thomas Schneck | Registration No. (Attorney/Agent) | 24,518 |
| Signature |  | Date | 06/25/2003 |

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